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Appl. No. 10/624,017
Atty. Docket No. P-124C2
Amtd dated March 17, 2005
Response to Office Action December 16, 2004
Customer No. 27752

MAR 17 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.	:	10/624,017
Applicant(s)	:	Gary Mitchell Davenport <i>et al.</i>
Filed	:	July 21, 2003
Title	:	Process And Composition For Controlling Fecal Hair Excretion And Trichobezoar Formation
TC/A.U.	:	1651
Examiner	:	Ruth A. Davis
Conf. No.	:	5722
Docket No.	:	P-124C2
Customer No.	:	27752

REPLY AFTER 1ST OFFICE ACTION UNDER 37 CFR §1.111(e)

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

INTRODUCTORY REMARKS

Dear Sir:

In response to the Office Action dated December 16, 2004 for the above-identified patent application, please consider the following remarks. Attached hereto is a Petition for Extension of Time, and the fee required under 37 C.F.R. § 1.17(a)(1), providing for a timely response up to and including April 16, 2005.

Remarks begin on page 2 of this paper.

MAR 17 2005

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**FACSIMILE TRANSMITTAL SHEET AND
CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8**

TO: Examiner Ruth A. Davis - United States Patent and Trademark Office

Fax No. 703-872-9306

Phone No. 571-272-0915

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on March 17, 2005, to the above-identified facsimile number.

Linda S. Jernigan (Signature)

FROM: Linda S. Jernigan (Typed or printed name of person signing Certificate)

Fax No. 513-622-3300

Phone No. 513-622-2811

Listed below are the item(s) being submitted with this Certificate of Transmission:**

- 1) Fee Transmittal - orig. w/copy
- 2) 1 Mo. Extension - orig. w/copy
- 3) Reply - 11 pages
- 4)
- 5)

Number of Pages Including this Page:

Inventor(s): Davenport et al.
S.N.: 10/624,017
Filed: July 21, 2003
Docket No.: P124C2

Comments:

**Note: Each paper must have its own certificate of transmission, OR this certificate must identify each submitted paper.

FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision. Effective December 8, 2004</small>		Complete if Known	
		Application Number	10/624017
		Confirmation Number	5722
		Filing Date	July 21, 2003
		First Named Inventor	Davenport et al.
		Examiner Name	Ruth A. Davis
Art Unit	1651		
TOTAL AMOUNT OF PAYMENT (\$120)	Attorney Docket No.	P124C2	

METHOD OF PAYMENT			FEE CALCULATION (continued)																																																										
<p>1. <input checked="" type="checkbox"/> The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to:</p> <p>Deposit Account Number: 16-2480 Deposit Account Name: The Procter & Gamble Company</p>			<p>5. ADDITIONAL FEES</p> <table> <thead> <tr> <th><u>Fee Description</u></th> <th><u>Fee Paid</u></th> </tr> </thead> <tbody> <tr> <td>Extension for reply within 1st month</td> <td>(\$120) [120]</td> </tr> <tr> <td>Extension for reply within 2nd month</td> <td>(\$450) []</td> </tr> <tr> <td>Extension for reply within 3rd month</td> <td>(\$1,020) []</td> </tr> <tr> <td>Extension for reply within 4th month</td> <td>(\$1,590) []</td> </tr> <tr> <td>Extension for reply within 5th month</td> <td>(\$2,160) []</td> </tr> <tr> <td>Information Disclosure Statement fee</td> <td>(\$180) []</td> </tr> <tr> <td>37 CFR 1.16(e) Late Oath/Declaration (nonprovisional)</td> <td>(\$130) []</td> </tr> <tr> <td>37 CFR 1.17 (q) Missing Parts (provisional)</td> <td>(\$50) []</td> </tr> <tr> <td>Non-English specification</td> <td>(\$130) []</td> </tr> <tr> <td>Notice of Appeal</td> <td>(\$500) []</td> </tr> <tr> <td>Filing a brief in support of an appeal</td> <td>(\$500) []</td> </tr> <tr> <td>Request for oral hearing</td> <td>(\$1,000) []</td> </tr> <tr> <td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)</td> <td>(\$1,370) []</td> </tr> <tr> <td>Other:</td> <td>[]</td> </tr> </tbody> </table>		<u>Fee Description</u>	<u>Fee Paid</u>	Extension for reply within 1 st month	(\$120) [120]	Extension for reply within 2 nd month	(\$450) []	Extension for reply within 3 rd month	(\$1,020) []	Extension for reply within 4 th month	(\$1,590) []	Extension for reply within 5 th month	(\$2,160) []	Information Disclosure Statement fee	(\$180) []	37 CFR 1.16(e) Late Oath/Declaration (nonprovisional)	(\$130) []	37 CFR 1.17 (q) Missing Parts (provisional)	(\$50) []	Non-English specification	(\$130) []	Notice of Appeal	(\$500) []	Filing a brief in support of an appeal	(\$500) []	Request for oral hearing	(\$1,000) []	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	(\$1,370) []	Other:	[]																											
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SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	Cynthia L. Clay	Registration No. (Attorney/Agent)	54,930	Telephone	(513) 622-0291
Signature	<i>Cynthia L. Clay</i>			Date	3/17/05

This collection of information is required by 37 CFR 1.17. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

FeeTrans.dit (Revised for P&G use 01/24/2005)

**FEE TRANSMITTAL
for FY 2005**

 Patent fees are subject to annual revision.
Effective December 8, 2004

Complete if Known

Application Number	10/624017
Confirmation Number	5722
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Examiner Name	Ruth A. Davis
Art Unit	1651
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TOTAL AMOUNT OF PAYMENT (\$120)
METHOD OF PAYMENT

1. The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to:
Deposit Account Number: 16-2480
Deposit Account Name: The Procter & Gamble Company

FEE CALCULATION (continued)
FEE CALCULATION
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Fee Fee Fee

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Fee Description

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Independent claims in excess of 3 (\$200 per claim)

Multiple dependent claim, if not paid (\$360)

**Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim)

**Reissue claims: each claim over 20 and more than original patent (\$50 per claim)

SUBTOTAL (4) (\$)SUBTOTAL (5) (\$) [120]

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Name (Print/Type)	Cynthia L. Clay	54,930	(513) 622-0291	
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